

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

1056045
APPLICANT(S)

FILING DATE

12/9/85 CLAIMS

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
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| TOTAL DEP. | ← | | 11 | ← | 18 | ← |
| TOTAL CLAIMS | | | 13 | | 20 | |

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
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| TOTAL CLAIMS | | | | | | |